2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000012802

1. Entity Name
COSSINI CORP.

44017936

Principal Place of Business	Mailing Address
3990 NW 132 ST. UNIT G OPALOCKA, FL 33054	3990 NW 132 ST. UNIT G OPALOCKA, FL 33054

2. Principal Place of Business 171 NW 23rd ST Suite, Apt. #, etc.	3. Mailing Address 171 NW 23rd St Suite, Apt. #, etc.
City & State MIAMI, FL	City & State MIAMI, FL
Zip 33127 Country USA	Zip 33127 Country USA

03112004   Chg-P   CR2E034 (10/03)

4. FEI Number 65-0980319	Applied For
	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DULANTO, GERMAN
3990 NW 132 ST.
UNIT C
OPALOCKA, FL 33054

7. Name and Address of New Registered Agent

Name: DULANTO, GERMAN
Street Address (P.O. Box Number is Not Acceptable):
171 NW 23rd St
City: MIAMI 33127 FL Zip Code 33127

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: GERMAN DULANTO
Signature, typed or printed name of registered agent and title if applicable.
(NOTE: Registered Agent signature required when reinstating)
DATE 3/11/2004

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing ☐   **$5.00** May Be
Trust Fund Contribution. ☐   Added to Fees

10. OFFICERS AND DIRECTORS	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE PSD ☑ Delete NAME DULANTO, GERMAN STREET ADDRESS 3990 NW 132 ST, UNIT G CITY-ST-ZIP OPALOCKA, FL 33054	TITLE PSD ☐ Change ☑ Addition NAME GERMAN DULANTO STREET ADDRESS 171 NW 23rd ST CITY-ST-ZIP MIAMI, FL 33127
TITLE ☐ Delete NAME STREET ADDRESS CITY-ST-ZIP	TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP
TITLE ☐ Delete NAME STREET ADDRESS CITY-ST-ZIP	TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP
TITLE ☐ Delete NAME STREET ADDRESS CITY-ST-ZIP	TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP
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TITLE ☐ Delete NAME STREET ADDRESS CITY-ST-ZIP	TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: GERMAN DULANTO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date 3/11/2004   Daytime Phone # (305) 573-9628